



# COMMONWEALTH of VIRGINIA

## DEPARTMENT OF SOCIAL SERVICES

October 20, 2023

*Sent Electronically*

Nicole Poulin

Family and Children's Trust Fund of Virginia

801 East Main Street, 15th Floor

Richmond, Virginia 23219

Dear Ms. Poulin:

The Virginia Department of Social Services (VDSS) commends the Child Abuse and Neglect Advisory Committee of the Family and Children's Trust Fund of Virginia for their continued work as a Citizen Review Panel (CRP) as part of Virginia's Child Abuse Prevention and Treatment Act (CAPTA) Plan. The feedback of our CRPs is critical to the improvement of our program for the children of the Commonwealth.

Child Protective Services (CPS) in Virginia is a continuum of specialized services designed to assist families who are unable to safely care for their children. CPS is child-centered, family-focused, and based on the belief that the primary responsibility for the care of children rests within their families. CPS encompasses the identification, assessment, investigation, and treatment of abused or neglected children. Virginia's specialized services are designed to:

- Protect children and their siblings;
- Prevent future abuse or neglect;
- Enhance parental capacity to provide adequate care; and
- Provide substitute care when the family of origin cannot remedy the safety concerns.

CPS will respond to valid child abuse or neglect reports by conducting a Family Assessment response or an Investigation response, also known as Differential response. The goals of both responses are: to assess child safety, strengthen and support families, and to prevent future child maltreatment. The track decisions are guided by state statute and local policy. In SFY 2022, there were 52,894 children reported as possible victims of

child abuse or neglect in 35,917 completed reports of suspected child abuse or neglect. Of those children, 4,911 were involved in founded Investigations, 8,179 were involved in unfounded Investigations, and 39,804 in Family Assessments (differential response). In SFY 2022, Family Assessments accounted for 73% of all CPS reports accepted by local Departments of Social Services, and as of 10/19/2022, 29 children died because of abuse or neglect. There were 31 children involved in 28 Human Trafficking Assessments, which are required when a report alleges a child is a victim of human trafficking, sex, or labor, and does not meet the validity criteria for an Investigation or Family Assessment.

Over the last year, VDSS continues to prioritize working towards meeting our federal outcomes related to child protection including responding to reports of abuse with a timely consistent response, providing ongoing services to children who are at high or very high risk (In-Home Services) and ensuring timely case closure. Additionally, VDSS is prioritizing family engagement using Family Partnership Meetings, and Child and Family Team Meetings.

We have reviewed your recommendations and thank you for your input. VDSS offers the following responses to your recommendations:

### **1. In-Home Services and Family First implementation**

VDSS continues to solidify and enhance tertiary prevention practice, while also maintaining a concerted focus on earlier (primary and secondary) prevention activities to ensure a well-resourced prevention continuum. Local Departments of Social Services (LDSS) provide prevention-based services to children and families in Virginia through the provision of In-Home Services for children who are at high or very high risk of recurrent child maltreatment and entry into foster care. In-Home Services also ensures that when children temporarily or permanently reside with relatives or fictive-kin caregivers, services are provided to ensure the safety and permanency of those living arrangements. Historically referred to as diversion placements, the provision of services to children and youth residing temporarily or permanently with relatives or fictive-kin caregivers has varied by locality. Regardless of where the child may be temporarily or permanently residing, the framework ensures routine assessment, and provision and monitoring of services to ensure safety of the child. In-Home Services provide an opportunity to partner with families to assess strengths, needs, protective factors, and what services may be needed to ensure the safety of the child and prevent out of home placement. In-Home Services practice guidance also ensures that consistent and meaningful contact with the family and collaterals is required, including a minimum of one visit with the child and caregivers monthly, Child and Family Team Meetings (CFTM) to be held every 90 days and Family Partnership Meetings (FPM) to be held at all critical decision points.

The Prevention Services Program also established five In-Home Services Regional Practice Consultant positions, one in each regional office, enabling VDSS to significantly increase the level of technical assistance, support, and ongoing review of In-Home Services case work at the LDSS level. The In-Home Services Practice Consultants are responsible for collaborating with the LDSS to provide programmatic consultation to enhance service delivery to children and families in In-Home Services cases in each

region. The In-Home Services Practice Consultants also assist LDSS in developing data-driven approaches that emphasizes a concerted focus on case opening behaviors, decision-making and assessment, and case practice that promotes meaningful engagement of children and families. This additional capacity at the regional level institutes regular and intentional provision of technical assistance toward implementing best practices and improving outcomes in In-Home Services cases. All in all, VDSS seeks continued collaboration with CAN Committee members and other child and family serving system partners in working toward meeting the outcomes for Virginia's children and families, to include recommendations for policy changes, training strategies, and resources or tools.

VDSS acknowledges that the findings presented in the Office of the Children's Ombudsman (OCO) report underscores the variability of practice in Virginia, as well as the diversity of the children, parents, and kin caregivers involved. In turn, VDSS will continue to utilize these insights to enhance the development of best practice strategies to prevent unnecessary entry into foster care and its In-Home Service practice framework. The primary goal of In-Home Services is to support families to safely maintain children, in their own homes or with alternate caregivers in their own communities, by addressing identified safety and risk concerns and reducing the reoccurrence of child maltreatment. This is achieved through engagement of the family, their support system, and other service providers. VDSS has strongly encouraged family participation in case planning and the involvement of extended family in the care and protection of children and recognizes that children and families will benefit from LDSS receiving additional guidance, training, and resources to support quality and uniform practice in the prevention of foster care.

Thus, continued efforts include developing uniform practice guidance to support alternative living arrangements with relatives or fictive-kin caregivers as needed. VDSS will continue to focus on the use of data to drive decisions, support recommendations, and conduct thorough root-cause analysis in this area of practice. Detailed living arrangement and services data will offer insight into the circumstances leading to the use of alternative living arrangements and the types of services and supports provided during the arrangement. This data will also enable VDSS to further explore whether disparities exist in alternative living arrangements statewide and how the practice impacts the well-being of children and families over time. VDSS will also continue to collaborate with the Virginia League of Social Services Executives (VLSSE) who has established a workgroup to discuss and consider potential recommendations in this area.

## **2. Recruitment, compensation, and retention of Child Welfare professionals and the child abuse and neglect Hotline staff**

VDSS continues to address the state and local level staffing shortages. As a result of the Office of the State Inspector General (OSIG) Audit and Recommendations, VDSS requested additional funding from the General Assembly to support our child protective services workforce. The funding included additional CPS workers and supervisors at local departments, Hotline Specialists, and Regional Practice Consultants. Funding was requested in SFY23 and will be requested in SFY24.

VDSS has created a Workforce Recruitment and Retention Workgroup, to include Jurisdiction Wide (JW) localities. JW localities are fully deviating agencies from the State. Some localities are already implementing, and we are receiving great feedback to support a recruitment and retention toolkit that should be rolled out in November. In addition, this workgroup is comprised of VDSS and LDSS staff, particularly leadership from VLSSE.

VDSS has two existing programs for funneling highly qualified and trained talent from all the public schools of social work with MSW programs in Virginia (George Mason University, Radford University, Norfolk State University, and Virginia Commonwealth University). The first program, the Child Welfare Stipend Program (CWSP), provides MSW and BSW senior students with \$10,000 per academic year of participation, specialized training through the university, Virginia's own training system, and an internship at a local DSS. In exchange, the participant agrees to work for one year at a local DSS post-graduation for each year they participated in the program. The second program, Child Welfare Employee Education Assistance Program (CWEEAP), provides \$5,000 for full-time LDSS workers pursuing an MSW at a partner university, in exchange for 6 months of work per program year participated. These programs now only apply to foster care, adoption, and prevention services positions. Future goals of the program include increasing the number of stipend slots offered through expansion to additional partner universities and expansion to include Child Protective Services investigations roles, which are dependent upon state funding capacity.

VDSS is excited about the new Office on Trauma and Resilience and looks forward to investigating possible partnerships with them in the future as it pertains to frontline child protection workers and workforce development via social work programs at Virginia universities.

### **3. Regional Child Death Review Teams**

VDSS continues to publish the recommendations made by the regional Child Fatality Review Teams each year. This year's annual [report](#) on child maltreatment deaths featured an update on which prevention recommendations from the previous year have been started and completed at the state level, and this information will continue to be included in future versions of the report. VDSS will continue to make annual presentations regarding the significant findings identified in this annual report.

### **4. Problematic sexual behavior between children**

VDSS continues to monitor reports of child-on-child sexual abuse. VDSS anticipates adding an additional data field to the child welfare information system (OASIS) to better track the number of child-on-child reports received by local departments. VDSS served as a key stakeholder on the FACT Problematic Sexual Behavior in Children Work Group. VDSS supports a uniform response to problematic sexual behavior in children across the State.

## **5. Human trafficking cases involving children**

VDSS continues to closely monitor the child welfare system's response to child trafficking. Despite the legislation passed in 2019 requiring a universal response by the child welfare system to all reports involving the trafficking of a child, local departments are responding to a very small number of trafficking cases. Training continues to be a key focus for VDSS to improve the child welfare system's response to reports of child trafficking. VDSS has partnered with the Department of Criminal Justice Services (DCJS) to provide training to child welfare staff, stakeholders, and key partners on the indicators of trafficking and conducting a human trafficking assessment. VDSS also continues to partner with DCJS and Virginia State Police to provide training to law enforcement on trafficking. VDSS has also provided technical lifelines to local departments on trafficking and conducting a human trafficking assessment.

## **6. Virginia's Safe Haven Laws**

Currently, CPS and Foster Care Guidance does not specifically address Safe Haven infants. Both programs will be making enhancements to their guidance to provide programmatic instruction to the LDSS on Safe Haven infants. Additionally, VDSS is completing a legislative study because of the 2023 session of the Virginia General Assembly on HB 2291. VDSS is also exploring possible legislative enhancements to Virginia's existing Safe Haven laws.

VDSS in collaboration with the Office of the Attorney General have identified a number of challenges related to Virginia's existing Safe Haven laws. Particularly, when the identity of the infant's parent is known to the hospital or local department. In those cases, local departments are bound by state and federal law to work the case as a traditional foster care case, despite the parent's desire to surrender their infant under Virginia's Safe Haven laws. Legislative changes would be needed to provide the infant's parent with anonymity.

VDSS is working on system enhancements to Virginia's child welfare information system (OASIS) to improve our data collection on infant's surrendered under Virginia's Safe Haven laws.

VDSS provides technical assistance to local departments who receive an infant surrendered under Virginia's Safe Haven laws. Regional Offices have also provided training to local departments on Safe Haven infants.

As a result of legislation (House Bill 50) passed during the 2022 session of the Virginia General Assembly, VDSS was required to establish a 24-hour toll-free Safe Haven hotline. CAPTA Funds are being utilized to purchase the 24-hour hotline service from the National Safe Haven Alliance (NSHA). NSHA began providing that service for VDSS in October 2022. VDSS was to also undertake a campaign to increase public awareness of the toll-free hotline and the Commonwealth's laws providing for relinquishment of an infant, relinquishment locations, and support and resources for parents and the general

public. VDSS was appropriated \$50,000 from general funds to implement the Safe Haven public awareness campaign.

VDSS collaborated with NSHA to produce the promotional materials needed for the Safe Haven public awareness campaign. The materials will be shared throughout the state by VDSS to provide information on the toll-free hotline, the safe relinquishment of an infant, infant relinquishment locations, and support and resources for parents and general public. The materials will be shared in a toolkit for the local agencies and posted on the VDSS public site. The toolkits include: (1) state-specific public awareness announcement; (2) video materials; (3) printed safe haven toolkit; (4) infant relinquishment location signs; (5) state specific safe haven provider training video. There will also be 5 billboards, one in each region, across the state with the Safe Have hotline information.

VDSS expects there will be an increase in the utilization of the Safe Haven hotline because of the public awareness campaign. Currently, VDSS receives monthly reports from NHSA as part of their operation of the state Safe Haven hotline. VDSS anticipates comparing the call volumes before, during, and after the public awareness campaign to measure the performance of the deliverables. This data will be provided to this committee.

We look forward to continuing to work together. We are available to answer any additional questions. Again, we thank you for serving as one of our Citizen Review Panels.

Sincerely,

Shannon Hartung  
Protection Program Manager

Cc: Kimberly Huhn Murphy, Children's Bureau